

# Work Order ID 74690

Wednesday, October 05, 2011 10:26:07 AM



Page 1

Item ID: D205-634-011

Accept



Setup Start



Revision ID:

Stop



Item Name: Skidtube

Start Date: 10/5/2011 Start Qty: 1.00



Cust Item ID:

Required Date: 10/21/2011 Req'd Qty: 1.00



Customer:

Reference:

Approvals:

Process Plan: M.L.J

Date: 11/10/05

Tooling:

Date:

Run Start



QC:

Date:

SPC (Y/N):

Date:

Stop



Sequence ID/ Work Center ID	Operation Description	Set Up/ Run Hours	Tool ID	Tool #	Plan Code	Accept Qty	Reject Qty	Reject Number	Insp. Stamp
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Draw Nbr

Revision Nbr

IIN D205-634

Rev F

100

0.00



DC

Document Control

Memo

0.00

Photocopy bluefile & type labels per PPP D205-634-011  
CHG 007

8/11/09

MLJ 11-11-9

110

Pick Kit

0.00



Packaging

Memo

0.00

Packaging

8/11/09

120

QC4- 100% Inspect kits for completeness

0.00



QC

Memo

0.00

Quality Control

8/11/09

8/11/09

73.011.

W/O:		WORK ORDER CHANGES					
DATE	STEP	PROCEDURE CHANGE	By	Date	Qty	Approval Chief Eng / Prod Mgr	Approval QC Inspector

Part No: \_\_\_\_\_ PAR #: \_\_\_\_\_ Fault Category: \_\_\_\_\_ NCR: Yes No DQA: \_\_\_\_\_ Date: \_\_\_\_\_

Resolution: \_\_\_\_\_ Disposition: \_\_\_\_\_ QA: N/C Closed: \_\_\_\_\_ Date: \_\_\_\_\_

NCR:		WORK ORDER NON-CONFORMANCE (NCR)						
DATE	STEP	Description of NC Section A	Corrective Action Section B			Verification Section C	Approval Chief Eng	Approval QC Inspector
			Initial Chief Eng	Action Description Chief Eng	Sign & Date			

**NOTE:** Date & initial all entries

**Work Order ID 74690**

Wednesday, October 05, 2011 10:26:07 AM

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Item ID: D205-634-011

Accept

Setup Start

Revision ID:

Stop

Item Name: Skidtube

Start Date: 10/5/2011 Start Qty: 1.00

Cust Item ID:

Required Date: 10/21/2011 Req'd Qty: 1.00


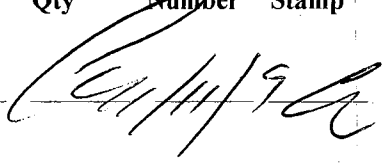

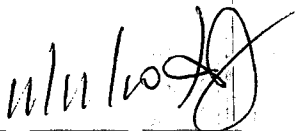
Customer:

Reference:

Approvals: Process Plan: \_\_\_\_\_ Date: \_\_\_\_\_ Tooling: \_\_\_\_\_ Date: \_\_\_\_\_  
QC: \_\_\_\_\_ Date: \_\_\_\_\_ SPC (Y/N): \_\_\_\_\_ Date: \_\_\_\_\_

Run Start

Stop

Sequence ID/ Work Center ID	Operation Description	Set Up/ Run Hours	Tool ID	Tool #	Plan Code	Accept Qty	Reject Qty	Reject Number	Insp. Stamp
130  Packaging	<b>Memo</b> Identify and pack for shipping as per PPP D205-634-011 Location: _____ PPP rev: _____	0.00  0.00							
140  QC Quality Control	QC21- Final Inspection - Work Order Release  <b>Memo</b>	0.00  0.00							  MF 11-11-09

W/O:		WORK ORDER CHANGES					
DATE	STEP	PROCEDURE CHANGE	By	Date	Qty	Approval Chief Eng / Prod Mgr	Approval QC Inspector

Part No: \_\_\_\_\_ PAR #: \_\_\_\_\_ Fault Category: \_\_\_\_\_ NCR: Yes No DQA: \_\_\_\_\_ Date: \_\_\_\_\_

Resolution: \_\_\_\_\_ Disposition: \_\_\_\_\_ QA: N/C Closed: \_\_\_\_\_ Date: \_\_\_\_\_

NCR:		WORK ORDER NON-CONFORMANCE (NCR)						
DATE	STEP	Description of NC Section A	Corrective Action Section B			Verification Section C	Approval Chief Eng	Approval QC Inspector
			Initial Chief Eng	Action Description Chief Eng	Sign & Date			

**NOTE:** Date & initial all entries

# Picklist Print

Wednesday, October 05, 2011 10:26:13 AM

Page 1

Work Order ID: 74690

Parent Item: D205-634-011

Parent Item Name: Skidtube



Start Date: 10/5/2011

Required Date: 10/21/2011

Start Qty: 1.00

Required Qty: 1.00

Comments: IPP Rev:P 02.08.28 Removed QC5 from Step 5 KJ  
 IPP Rev:Q 08-08-12 now @ chg 006 (DSI 9417) DD verf:EC  
 IPP Rev R 09.01.28 now chg 007 DSI9417 revB EC verf:DD IPP Rev:S  
 10.12.01 as per chg008 DD verf:EC

Component Item ID/ Item Name	Replacement Item ID	Mfg/ Purch	Bin Item	Primary Location	Last Location	Route Seq ID	Unit of Measure	Qty on Hand	Qty per Kit	Total Qty	Qty Issued	Date Issued	Status
D205-634-041  Replacement Skidtube		Manufactured	No			110	Each	3.0000	1	1			

Location	Loc Qty	Loc Code
FG073	3	
72092	1	
72290	1	
72860	1	

K10003  Saddle, D205-634-011		Manufactured	No			110	Each	4.0000	1	1			
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Location	Loc Qty	Loc Code
PKG	4	
57963	0	
73247	4	

73247

W/O:		WORK ORDER CHANGES					
DATE	STEP	PROCEDURE CHANGE	By	Date	Qty	Approval Chief Eng / Prod Mgr	Approval QC Inspector

Part No: \_\_\_\_\_ PAR #: \_\_\_\_\_ Fault Category: \_\_\_\_\_ NCR: Yes No DQA: \_\_\_\_\_ Date: \_\_\_\_\_

Resolution: \_\_\_\_\_ Disposition: \_\_\_\_\_ QA: N/C Closed: \_\_\_\_\_ Date: \_\_\_\_\_

NCR:		WORK ORDER NON-CONFORMANCE (NCR)						
DATE	STEP	Description of NC Section A	Corrective Action Section B			Verification Section C	Approval Chief Eng	Approval QC Inspector
			Initial Chief Eng	Action Description Chief Eng	Sign & Date			

**NOTE:** Date & initial all entries